



Nebraska Health and Human Services
HEALTH ALERT NETWORK
Update

Nebraska Mumps Outbreak Update

- ***Because Nebraska is currently experiencing an outbreak of mumps, all patients with classic symptoms of mumps should be diagnosed as having mumps, regardless of whether the patient has been confirmed with lab testing. Cases should be isolated at least 5 days post onset and reported promptly to local health department, as required by Nebraska Statutes.***
 - Vaccinated persons may have transient or only slight IgM elevation causing false negative IgM results.
 - Mumps is the only known cause of epidemic parotitis
- ***All health care workers should have 2 doses of MMR (measles/mumps/rubella) or proven immunity, according to ACIP guidelines.***
 - Adults have a higher risk of complications secondary to mumps than children
 - Because persons with mumps are contagious prior to symptom onset and up to 25% of persons with mumps remain asymptomatic, susceptible health care workers run the risk of transmitting mumps to patients.

Summary of Nebraska Outbreak (January 1 to May 8, 2006)

The epidemiology of mumps has changed in the setting of high rates of vaccination. Experts at CDC have observed that IgM response to mumps can be transient in vaccinated persons, causing false negative tests.

Mumps is the only known cause of epidemic parotitis. Thus, all cases of inflamed parotid or other salivary gland of two or more days duration should be treated as mumps. Patients should be isolated for 5 days following the onset of symptoms.

Total mumps cases (# of cases)	256
With parotitis or other salivary swelling	232
Laboratory confirmed	25
Confirmed based on documented exposure	27
Age groups most affected (% of cases)	
25-39	31%
40-59	21%
18-24	21%
Complications (# of cases)	
Hospitalization	9
Meningitis	5
Orchitis	14
Mastitis	11
Transient deafness	3

More information: Nebraska HHSS: www.hhss.ne.gov (click on mumps link)
CDC www.cdc.gov

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